

August 4, 2014

South Coast Air Quality Management District 21865 Copley Drive P.O. Box 4944 Diamond Bar, CA 91765-0944

Attn: Mr. Jackson Yoong

Re:

Permit No. G2985 - Modification of Existing Ambient Aeration Room

Sterigenics' Los Angeles 50th St. Facility-Facility ID #: 126191

Dear Mr. Yoong,

Per our phone conversation, enclosed is an application to modify the existing ambient temperature aeration room at our 50<sup>th</sup> Street Los Angeles Facility into two separate aeration rooms (one heated and one ambient). The new aeration rooms will be constructed within the footprint of the existing ambient aeration room. The existing heated aeration room will continue unchanged. The facility's aeration rooms presently operate under Permit # G2985 (A/N 497029) issued May 22, 2009.

The proposed heated aeration room modification is planned for construction in early January of 2015. Other than creating a second heated aeration room from an area within the existing ambient aeration room, no changes will occur in the emission treatment process involving the facility's Donaldson Abator system.

Included with this submission are Forms 400-A, 400-CEQA and 400-E-GI, and a check for \$3671.95.

Please contact me at 847/263-3499 if you have questions or should need further information.

Sincerely,

Jeffrey Smith EH&S Manager

Encl:

Cc: Mr. David Ibarra

# (D)

South Coast Air Quality Management District

#### Form 400-A

#### **Application Form for Permit or Plan Approval**

List only one piece of equipment or process per form.

Mail To: SCAQMD P.O. Box 4944 Diamond Bar, CA 91765-0944

Tel: (909) 396-3385 www.aqmd.gov

| Section A Operator Information  1. Facility Name (Business Name of Operator to Appear on   | the Permit\•                                 |   |  | Valid AOMD Facility ID (April 14)                                    |
|--|--|---|--|--|
| Sterigenics U.S., LLC - Los Angeles  | '  | 2. Valid AQMD Facility ID (Available On<br>Permit Or Invoice Issued By AQMD): |  |  |
| 3. Owner's Business Name (If different from Business Nam   |  | • •   |  |  |
| o. Owner 5 Dustriess Hume (if different from Dustriess Hair  | le of Operatory.                             |   |  | 126191   |
| Section B - Equipment Location Address   |  | Section C - Permit  | Mailing Address  |  |
| 4. Equipment Location Is:   (For equipment operated at various locations, provided to the control of the contro | Various Location e address of initial site.) | 5. Permit and Corresp   | oondence Information:<br>ame as equipment locatio      | n address  |
| 4801 50th Street   |  | 2015 Spring Rd.   |  |  |
| Street Address Los Angeles , CA  | Address                                      |   |  |  |
| Los Angeles , CA   | Oak Brook<br>City                            |   | , <u>IL 60523</u><br>State Zip                         |  |
| David Ibarra Gener   | al Manager                                   | Jeffrey Smith   |  | EHS Manager  |
| Contact Name Title (323) 582-8421 (323) 5  | 82-6552                                      | Contact Name  |  | Title  |
| Phone # Ext. Fax #   | 102-0332                                     | (847) 263-3499<br>Phone #   | Ext.   | (847) 855-6123<br>Fax#   |
| E-Mail: dibarra@sterigenics.com  |  | E-Mail: jpsmith@st  | erigenics.com  |  |
| Section D - Application Type   |  |   |  |  |
| 6. The Facility Is:   Not In RECLAIM or Title  | V O In RECLAIM                               | O In Title V  | O In RECLAIM & Ti                                      | tle V Programs   |
| 7. Reason for Submitting Application (Select only ONE):  |  |   |  |  |
| 7a. New Equipment or Process Application:  | 7c. Equipment or                             | Process with an Existing  | /Previous Application o                                | r Permit:  |
| New Construction (Permit to Construct)   | C Administrative                             |   |  |  |
| C Equipment On-Site But Not Constructed or Operational   | <ul> <li>Alteration/Mod</li> </ul>           | · ·   |  | <b>Existing or Previous</b>  |
| C Equipment Operating Without A Permit *   | Alteration/Mod                               | dification without Prior Approval *   |  | Permit/Application   |
| C Compliance Plan  | Change of Cor                                |   |  | If you checked any of the items in 7c., you MUST provide an existing |
| Registration/Certification   | Change of Cor                                | dition without Prior Appro  | val *  | Permit or Application Number:  |
| Streamlined Standard Permit  | C Change of Loc                              |   | •  | G2985  |
| 7b. Facility Permits:  |  | ation without Prior Approve   | 1  |  |
| C Title V Application or Amendment (Refer to Title V Matrix  | C Equipment Op                               | erating with an Expired/Ina   | ctive Permit *   |  |
| C RECLAIM Facility Permit Amendment  | * A Higher Permit Prod                       | cessing Fee and additional An   | nual Operating Fees (up to 3                           | full years) may apply (Rule 301(c)(1)(D)(i)).                        |
| 8a. Estimated Start Date of Construction (mm/dd/yyyy):01/01/2015   | 8b. Estimated End Date of 0<br>01/1          | Construction (mm/dd/yyy<br>5/2015   | y): 8c. Estimated Sta                                  | rt Date of Operation (mm/dd/yyyy): 01/15/2015                        |
| 9. Description of Equipment or Reason for Compliance   |  | 10. For Identical equip   | ment, how many addition                                | onal   |
| Modification of existing 322' x 40' x 16' ambien   |  | (Form 400-A require   | eing submitted with this<br>ed for each equipment / pr | application?   |
| two aeration rooms (1 heated and 1 ambient) i  11. Are you a Small Business as per AQMD's Rule 102 de  |  | <u> </u>  | iolation (NOV) or a Notice                             |  |
| (10 employees or less and total gross receipts are \$500,000 or less OR a not-for-profit training center)  | No O Yes                                     | Comply (NC) bee   | n issued for this equipm<br>If Yes, provide NOV/       | nent? • No • Yes   |
| Section E Facility Business Information  |  |   |  |  |
| <ol> <li>What type of business is being conducted at this equi<br/>Ethylene oxide product sterilization</li> </ol>   | pment location?                              |   | ess primary NAICS Cod<br>ustrial Classification System |  |
| 15. Are there other facilities in the SCAQMD jurisdiction operated by the same operator?   | C No © Yes                                   | 16. Are there any scho<br>1000 feet of the fac                                |  | No ○ Yes   |
| Section F Authorization/Signature / hereby   | certify that all information con             |   |  | olication are true and correct                                       |
| 17. Signature of Responsible Official:   | 18. Title of Responsib                       |   | 19. I wish to review the                               | permit prior to issuance.  |
| Mitogran   | Sr. V.P. Globa                               |   | (This may cause a de<br>application process.)          | • Yes  |
| 20. Print Name:<br>Kathleen Hoffman  | 21. Date:<br>07/24/201                       | 14  | 22. Do you claim confid<br>data? (If Yes, see in       | lentiality of structions.) • No • Yes                                |
| 23. Check List:   Authorized Signature/Date  | Form 400-CEQA                                | ■ Supplemental (  | Form(s) (ie., Form 400-E                               | -xx)   |
| AOMD APPLICATION TRACKING # CHECK # USE ONLY   | AMOUNT RECEIVED<br>\$                        | PAYMENT TRACKI  | NG#  | VALIDATION   |
| DATE APP DATE APP CLASS BASIC REJ REJ I III CONTROI  | EQUIPMENT CATEGORY                           | CODE TEAM ENGINEER  | REASON/ACTION TAKE                                     | N  |



### South Coast Air Quality Management District Form 400-CEQA

#### California Environmental Quality Act (CEQA) Applicability

Mail To: SCAQMD P.O. Box 4944 Diamond Bar, CA 91765-0944

> Tel: (909) 396-3385 www.agmd.gov

The SCAQMD is required by state law, the California Environmental Quality Act (CEQA), to review discretionary permit project applications for potential air quality and other environmental impacts. This form is a screening tool to assist the SCAQMD in clarifying whether or not the project<sup>1</sup> has the potential to generate significant adverse environmental impacts that might require preparation of a CEQA document [CEQA Guidelines §15060(a)].<sup>2</sup> Refer to the attached instructions for guidance in completing this form.<sup>3</sup> For each Form 400-A application, also complete and submit one Form 400-CEQA. If submitting multiple Form 400-A applications for the same project at the same time, only one 400-CEQA form is necessary for the entire project. If you need assistance completing this form, contact Permit Services at (909) 396-3385 or (909) 396-2668.

| Permi   | t Service              | es at (90            | 09) 396-3385 or (909) 396-2668.  |  |  |  |
|---|------------------------|----------------------|--|--|--|--|
| Secti   | on A -                 | Facility             | Information  |  |  |  |
| 1. Facility Name (Business Name of Operator To Appear On The Permit): 2. Valid AQMD Facility ID (Available On Permit Or Invoice Iss |                        |                      |  |  |  |  |
| Sterigenics U.S., LLC - Los Angeles 50th St. Facility  By AQMD): 126191   |                        |                      |  |  |  |  |
| 3. Pro  | ject De                | scriptio             | on:  |  |  |  |
|   | _                      | -                    | of existing 322' x 40' x 16' ambient aeration room to create two new aeration rooms (one heated and  |  |  |  |
| 01  | ne am                  | bient)               | to provide a total of three aeration rooms at the 50th Street Facility with existing emission controls.  |  |  |  |
| Secti   | on B -                 | Review               | For Exemption From Further CEQA Action   |  |  |  |
| Chec  | "Yes" c                | r "No" a             | as applicable  |  |  |  |
|   | Yes                    | No                   | Is this application for:   |  |  |  |
| 1.  | 0                      | •                    | A CEQA and/or NEPA document previously or currently prepared that specifically evaluates this project? If yes, attach a copy of the signed Notice of Determination to this form.   |  |  |  |
| 2.  | 0                      | •                    | A request for a change of permittee only (without equipment modifications)?  |  |  |  |
| 3.  | 0                      | •                    | A functionally identical permit unit replacement with no increase in rating or emissions?  |  |  |  |
| 4.  | 0                      | •                    | A change of daily VOC permit limit to a monthly VOC permit limit?  |  |  |  |
| 5.  |                        | •                    | Equipment damaged as a result of a disaster during state of emergency?   |  |  |  |
| 6.  | 0                      | •                    | A Title V (i.e., Regulation XXX) permit renewal (without equipment modifications)?   |  |  |  |
| 7.  | 0                      | •                    | A Title V administrative permit revision?  |  |  |  |
| 8.  |                        | •                    | The conversion of an existing permit into an initial Title V permit?   |  |  |  |
| If "Yes<br>page 2   | s" is che<br>2 and sig | cked for<br>gn and o | r any question in Section B, your application does not require additional evaluation for CEQA applicability. Skip to Section D - Signatures on date this form.   |  |  |  |
| Section   | n C - I                | Review               | of Impacts Which May Trigger CEQA  |  |  |  |
|   | ete Part<br>tach it to |                      | y checking "Yes" or "No" as applicable. To avoid delays in processing your application(s), explain all "Yes" responses on a separate sheet rm.   |  |  |  |
|   | Yes                    | No                   | Part I - General   |  |  |  |
| 1.  | 0                      | •                    | Has this project generated any known public controversy regarding potential adverse impacts that may be generated by the project?  Controversy may be construed as concerns raised by local groups at public meetings; adverse media attention such as negative articles in newspapers or other periodical publications, local news programs, environmental justice issues, etc. |  |  |  |
| 2.  | 0                      | •                    | Is this project part of a larger project? If yes, attach a separate sheet to briefly describe the larger project.  |  |  |  |
|   | <u>_</u>               |                      | Part II - Air Quality  |  |  |  |
| 3.  | 0                      | •                    | Will there be any demolition, excavating, and/or grading construction activities that encompass an area exceeding 20,000 square feet?  |  |  |  |
| 4.  | 0                      | •                    | Does this project include the open outdoor storage of dry bulk solid materials that could generate dust? If Yes, include a plot plan with the application package.   |  |  |  |
|   |                        |                      |  |  |  |  |

<sup>&</sup>lt;sup>1</sup> A "project" means the whole of an action which has a potential for resulting in physical change to the environment, including construction activities, clearing or grading of land, improvements to existing structures, and activities or equipment involving the issuance of a permit. For example, a project might include installation of a new, or modification of an existing internal combustion engine, dry-cleaning facility, boiler, gas turbine, spray coating booth, solvent cleaning tank, etc.

<sup>&</sup>lt;sup>2</sup> To download the CEQA guidelines, visit http://ceres.ca.gov/env\_law/state.html.

<sup>&</sup>lt;sup>3</sup> To download this form and the instructions, visit http://www.aqmd.gov/ceqa or http://www.aqmd.gov/permit

| Section C Review of Impacts Which May:Trigger CEQA (cont.) |                               |                   |  |  |  |  |
|--|-------------------------------|-------------------|--|--|--|--|
|  | Yes                           | No                | Part II - Air Qualit   | <u> </u>   | discussion and state of the sta |  |
| 5.   | 0                             | •                 | Would this project result in noticeable off-site odors from activities that may not be subject to SCAQMD permit requirements? For example, compost materials or other types of greenwaste (i.e., lawn clippings, tree trimmings, etc.) have the potential to generate odor complaints subject to Rule 402 – Nuisance.  |  |  |  |
| 6.   | 0                             | •                 |  |  | n marine vessels, trains and/or airplanes?   |  |
| 7.   | 0                             | •                 | Will the proposed vehicle to or from   | d project increase the QUANTITY of ha<br>n the site by greater than or equal to ti | azardous materials stored aboveground onsite or transported by mobile he amounts associated with each compound on the attached Table 1?4   |  |
|  |                               |                   | Part III – Water Ro  |  |  |  |
| 8.   | 0                             | •                 | Will the project increase demand for water at the facility by more than 5,000,000 gallons per day?  The following examples identify some, but not all, types of projects that may result in a "yes" answer to this question: 1) projects that generate steam; 2) projects that use water as part of the air pollution control equipment; 3) projects that require water as part of the production process; 4) projects that require new or expansion of existing sewage treatment facilities; 5) projects where water demand exceeds the capacity of the local water purveyor to supply sufficient water for the project; and 6) projects that require new or expansion of existing water supply facilities. |  |  |  |
| 9.   | O                             | •                 | Will the project require construction of new water conveyance infrastructure?  Examples of such projects are when water demands exceed the capacity of the local water purveyor to supply sufficient water for the project, or require new or modified sewage treatment facilities such that the project requires new water lines, sewage lines, sewage hookups, etc.  |  |  |  |
|  |                               |                   |  | ortation/Circulation   |  |  |
| 10.  |                               |                   | J  | esult in (Check all that apply):   |  |  |
|  | 0                             | <b>©</b>          | <u></u>  | nore than 350 new employees?   |  |  |
| 1  | 0                             | 0                 |  |  | and/or from the facility by more than 350 truck round-trips per day?   |  |
|  |                               | 0                 |  | omer traffic by more than 700 visits per   | r day?   |  |
| <u> </u>   | <del></del>                   |                   | Part V - Noise   |  |  |  |
| 11.  |                               | •                 |  | <del></del>  | oise GREATER THAN 90 decibels (dB) at the property line?   |  |
| <u> </u>   |                               |                   | Part VI - Public So  |  |  |  |
| 12.  | <u> </u>                      |                   |  |  | ditional public services in any of the following areas (Check all that apply):   |  |
|  | 0                             | •                 | 1  | · · · · · · · · · · · · · · · · · · ·  | tential amount of wastes generated by the project is less than five tons per day.  |  |
|  | 0                             | 0                 |  | ste disposal? Check "No" if the projecte<br>y (or equivalent in pounds).           | ed potential amount of hazardous wastes generated by the project is less than 42   |  |
| **REMI   | NDER: F                       | or each           |  | · · · · · · · · · · · · · · · · · · ·  | ing but not limited to estimated quantities, volumes, weights, etc.**  |  |
| Sectio   | mD - S                        | Signatu           | ıres   |  |  |  |
| I HER<br>CORRI<br>RIGHT                                    | REBY CI<br>RECT TO<br>T TO CO | ERTIFY<br>O THE E | Y THAT ALL INFO<br>BEST OF MY KNOV<br>IR OTHER PERTINE   | WLEDGE. I UNDERSTAND THAT THIS<br>Ent information in Determining (                 | -  |  |
| 1. Signa   |                               | -                 | sible Official of Firm:  |  | 2. Title of Responsible Official of Firm:  |  |
| · · ·  |                               |                   | 1 toll Ma  |  | Sr. Vice President, Global EHS   |  |
|  |                               | •                 | onsible Official of Firm   | <b>n:</b>  | 4. Date Signed:  |  |
|  | thleen                        |                   |  |  | 07/24/2014   |  |
| 5. Phon  | e# of Re                      | esponsi           | ible Official of Firm:   | 6. Fax # of Responsible Official of Firm:  | 7. Email of Responsible Official of Firm:  |  |
| •  | 30) 928                       |                   |  | (630) 928-1701   | KHoffman@Sterigenics.com   |  |
| 8. Signa   | ature of                      | Prepare           | r, (If prepared by perso   | on other than responsible official of firm):                                       | 9. Title of Preparer:  |  |
| \<br>  | 1/2                           | <u>ښځ</u>         | milh   |  | EHS Manager  |  |
| 10. Print Name of Preparer:                                |                               |                   | irer:  |  | 11. Date Signed:   |  |
|  | frey Sı                       |                   |  |  | 07/24/2014   |  |
| 12. Pho  | ne # of P                     | reparer           | :  | 13. Fax # of Preparer:   | 14. Email of Preparer:   |  |
| (847) 263-3499 (630) 928-1701                              |                               | (630) 928-1701    | JPSmith@Sterigenics.com  |  |  |  |

THIS CONCLUDES FORM 400-CEQA. INCLUDE THIS FORM AND ANY ATTACHMENTS WITH FORM 400-A.

<sup>&</sup>lt;sup>4</sup> Table 1 – Regulated Substances List and Threshold Quantities for Accidental Release Prevention can be found in the Instructions for Form 400-CEQA.

## Additional Heated Aeration Room- Permit Application Sterigenics U.S., LLC 4801 E. 50<sup>th</sup> Street Los Angeles Facility Facility ID # 126191

#### FORM 400-E-GI

#### GENERAL INFORMATION SUMMARY

#### 1. Equipment/Process Location Drawing:

Attachment 1 provides a diagram depicting the site location and facility layout. Also shown is the location of the proposed heated aeration room.

#### 2. Equipment Description:

This project consists of converting a portion of the existing  $322' \times 39.6' \times 16'$  high ambient temperature aeration room into a second heated aeration room. The new heated aeration room will measure approximately 97.2' wide  $\times 39.6'$  long  $\times 16'$  high. The remaining space will continue as an ambient aeration area.

#### 3. Process Description:

Following Ethylene Oxide (EtO) gas sterilization in one of the facility's sterilization chambers, palletized products are placed in an aeration room (either heated aeration at ~115  $^{0}$ F, or ambient temperature aeration) for typically 1-2 days. The aeration rooms are used for off-gassing EtO prior to the sterilized products being shipped to customers. As shown in Attachment 2, the new heated aeration room will use the existing 14" diameter duct system installed for the aeration rooms for transporting EtO emissions to the Donaldson catalytic oxidation abator system for treatment. The Donaldson system operates under AQMD Permit No. G2976.

#### 4. Operating Schedule:

The aeration room operates 24 hours per day, 365 days per year.

#### 5. Process Rate:

In 2013, approximately 193,900 pounds of EtO was used for product sterilization at the 50<sup>th</sup> Street plant. Of this total, approximately 4% (or about 7755 pounds/year) is the estimated amount of untreated process EtO emissions originating from the aeration rooms.

#### 6. Fuels & Burners Used:

This section is not applicable - no fuel usage/burning is associated with the ambient aeration room.

#### 7. Flow Diagram:

A simplified process flow diagram is provided in Attachment 3. The basic process steps are:

#### Additional Heated Aeration Room- Permit Application Sterigenics U.S., LLC 4801 E. 50<sup>th</sup> Street Los Angeles Facility Facility ID # 126191

- Product is received for processing
- Preconditioning of product
- Product sterilization
- Aeration of sterilized product
- Product shipping

#### 8. Drawings of Equipment/Process:

See Attachments 4 and 5 for diagrams of the proposed heated aeration room.

#### 9: Drawings of Exhaust System

See Attachment 2 for a plan drawing of the aeration room ductwork connecting to the Donaldson catalytic oxidation abator system.

#### 10. Stack/Exhaust Emissions Data

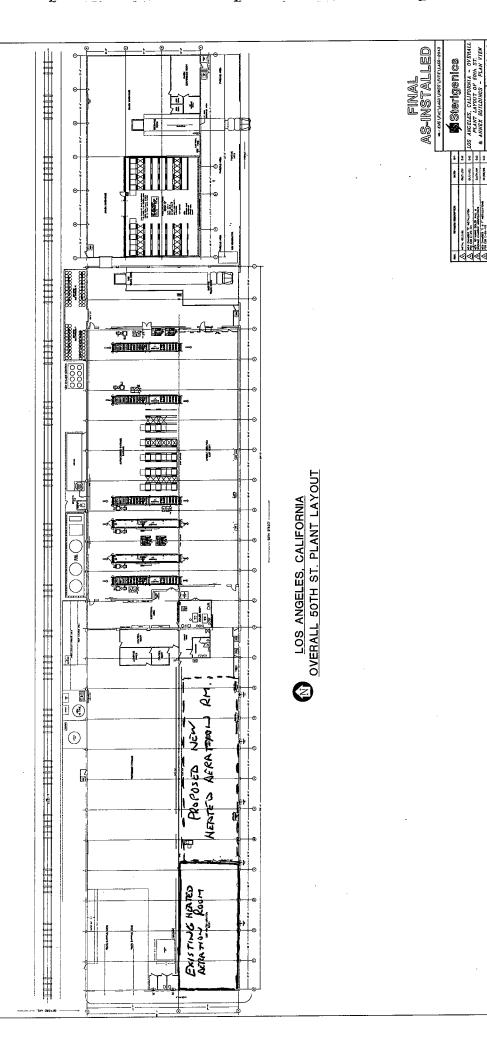
The Donaldson abator system was last tested in April, 2014 and demonstrated a 99.7 % control efficiency for EtO emissions from the aeration rooms. This treatment efficiency complies with both the 40 CFR Part 63, Subpart O and AQMD Rule 1405 standards. Based on 2013 operational data, EtO emissions from the facility's aeration rooms totaled approximately 7755 pounds. Following treatment in the Donaldson abator, an estimated 21 pounds of EtO emissions were emitted for the year.

#### 11. Air Quality Impact:

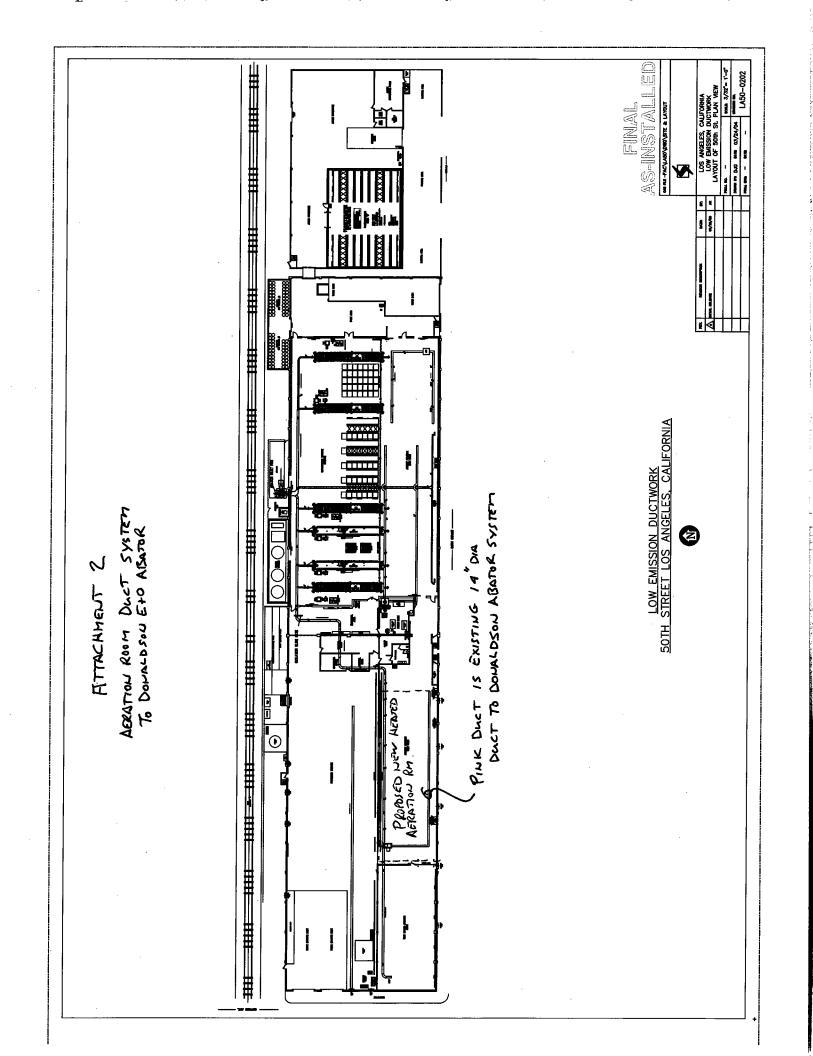
As stated in #10 (above), treated EtO emissions attributable to the aeration rooms amount to approximately 21 pounds annually. No other constituents are expected to be present in significant amounts.

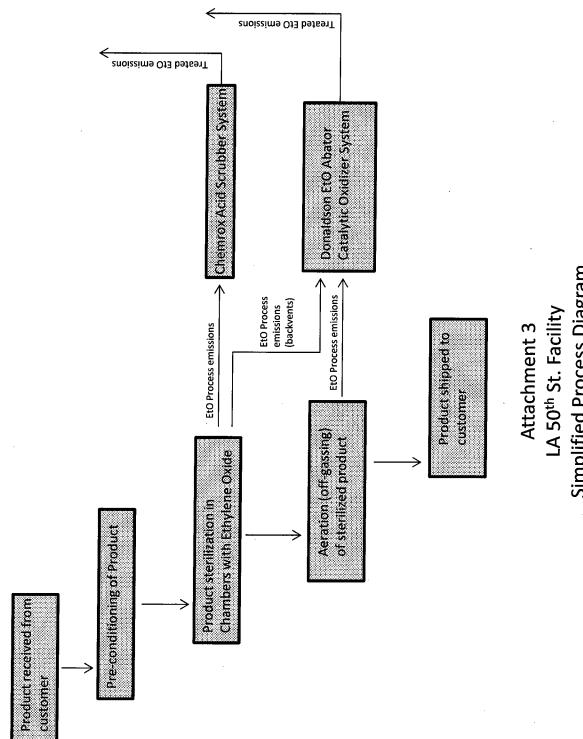
| Authorized Rep: <u>Jeffrey Smith</u> | Title: <u>EHS Manager</u> |
|--------------------------------------|---------------------------|
| $\bigcap \bigcap \bigcap C$          | A                         |
| Authorized Rep Signature:            | mulh Date: 1/2 4, 2014    |
|                                      |                           |

ATTACHHENT 1 FACILITY LAYOUT DIAGRAM



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Simplified Process Diagram

3-D DINGRAM OF PROPOSED HEATED AERATION ROOM

LOCKER CONTROL ROOM PLAN DIAGRAN OF PROPOSED HENTED AERATION RM CENTRAL HEATED AERATION "∀" 

ATTACHMENT